HIV/AIDS Profile: Congo, Democratic Republic

Demographic Indicators

	with AIDS	without AIDS		with AIDS	without AIDS
Population (1000s)	51,965	53,412	Growth Rate (%)	3.2 %	3.5 %
Crude Birth Rate	46	47	Crude Death Rate	15	13
Infant Mortality Rate			Life Expectancy		
Both Sexes	102	97	Both Sexes	49	54
Male	111	106	Male	47	52
Female	92	87	Female	51	56

Percent Urban	29		Total Fertility Rate	6.9	

Note: Above indicators are for 2000.

Estimated % of adults living with HIV/AIDS, end 1999 5.1 % Cumulative AIDS rate (per 1,000) as of 12/19/98 0.77 Cumulative AIDS cases as of 12/19/98 38426

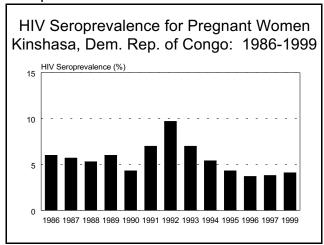
Sources: U.S. Census Bureau, UNAIDS, Population Reference Bureau, World Health Organization.

Epidemiological Data

Epidemic State: Generalized

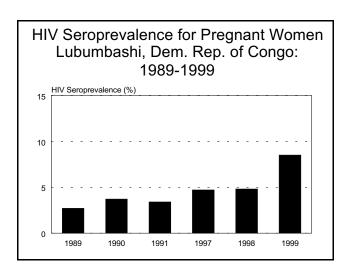
HIV prevalence among pregnant women in the Democratic Republic of the Congo (DROC), while serious, has remained at 10 percent or below in urban areas of the country since 1986. In addition, based on the scant amount of data available, rural areas had infection rates that approximated some urban areas. No clear trend emerged regarding the direction of the epidemic among low-risk groups as prevalence either fluctuated or the data was sparse.

 HIV prevalence among pregnant women in Kinshasa, the capital of the DROC, has ranged from 4 to 10 percent during the years 1986-99, according to sentinel surveillance.

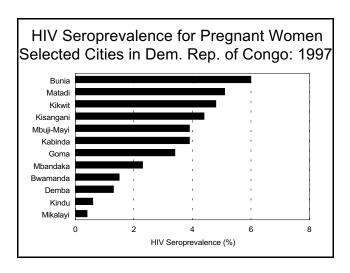


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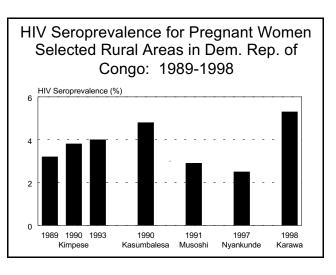
• Lubumbashi is the capital of Shaba Province. HIV infection levels there have increased three-fold during the 1990s. In 1989, 3 percent of pregnant women were HIV positive. In 1999, almost 9 percent tested positive.



• HIV prevalence among pregnant women varies by city in the DROC. Sentinel surveillance data for 1997 indicated that Bunia, in the northeast close to the Uganda border, had a prevalence rate of 6 percent while in Mikalayi, located in Kasai-Oriental Province, less than 1 percent of pregnant women tested were HIV positive.

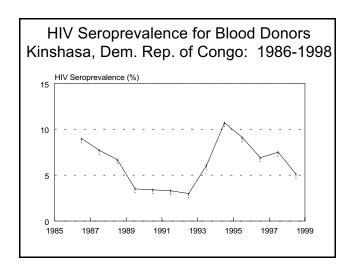


• Available information from the sentinel surveillance system on the epidemic in rural areas showed that HIV prevalence varied among pregnant women. In 1998 in Karawa, 5 percent of pregnant women tested were HIV positive while, in 1997, 3 percent of pregnant women in Nyankunde tested positive. These infection rates are similar to what was observed in urban areas during the same time period.

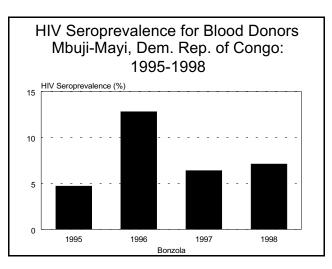


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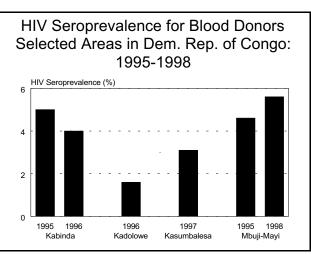
• The level of HIV infection among blood donors from a number of sentinel sites in Kinshasa has fluctuated since 1986. Prevalence has ranged anywhere from 3 to 11 percent.



• HIV seroprevalence among blood donors in Mbuji-Mayi, the capital and major city of Kasai-Oriental Province, has varied. At Bonzola, a sentinel surveillance site in Mbuji-Mayi, infection levels ranged from 5 percent in 1995 to 13 percent in 1996.

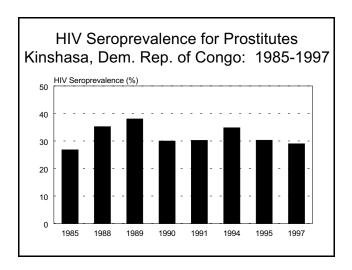


• HIV prevalence among blood donors in selected areas of the DROC varied by location in the mid to late 1990s. At Kasumbalesa, 3 percent of donors tested were HIV positive in 1997 while, in Mbuji-Mayi, data from all sentinel sites indicated that almost 6 percent tested positive in 1998.

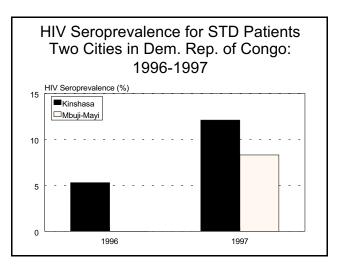


Congo, Democratic Republic

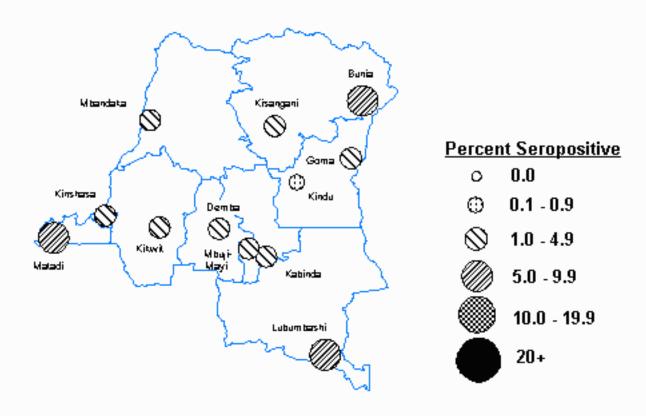
 HIV prevalence among prostitutes in Kinshasa has fluctuated since 1985. Twenty-nine percent of prostitutes tested in serosurveys in 1997 were HIV positive.



• There is very little data on HIV infection levels among STD patients in the DROC. In both Kinshasa and Mbuji-Mayi, HIV prevalence increased between 1996 and 1997. In Kinshasa, 12 percent of STD patients tested in 1997 were positive, up from 5 percent the previous year. In Mbuji-Mayi, there was no evidence of infection in 1996. In 1997, however, 8 percent of STD patients tested were infected with HIV.



Seroprevalence of HIV-1 for Pregnant Women Dem. Rep. of Congo: 1997 - 1999



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